

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 4785D1US				
<p style="text-align: center; margin: 0;"><u>CERTIFICATE OF EFS WEB TRANSMISSION</u></p> <p>Date <u>August 4, 2009</u></p> <p>I hereby certify that this correspondence and any other attachment noted on the automated Acknowledgment Receipt, is being transmitted from within the Pacific Time zone to the Commissioner for Patents via the EFS Web server on the date indicated above.</p> <p style="text-align: center;">_____ Cynthia K. Dawn (Name) _____ /Cynthia K. Dawn/ (Signature)</p>		<p>In re Application of Jeffery D. Frazier</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="padding: 2px;">Application Number 10/800,388</td> <td style="padding: 2px;">Filed March 12, 2004</td> </tr> </table> <p>For MICRODEVICE WITH INTEGRATED MEMORY</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="padding: 2px;">Group Art Unit 1795</td> <td style="padding: 2px;">Examiner OLSEN, Kaj K.</td> </tr> </table>	Application Number 10/800,388	Filed March 12, 2004	Group Art Unit 1795	Examiner OLSEN, Kaj K.
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<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner, dated February 4, 2009, rejecting the following claims: 30-45, 49, 55 and 56.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>540.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>50-3994</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is hereby requested.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the</p> <p><input type="checkbox"/> assignee of record of the entire interest.</p> <p><input type="checkbox"/> applicant.</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____.</p> <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 50%; text-align: center;"> <u>August 4, 2009</u> Date </td> <td style="width: 50%; text-align: center;"> <u>/Andrew K. Finn/</u> (Signature) </td> </tr> </table> <p style="text-align: center; margin-top: 10px;"> <u>Andrew K. Finn, Reg. No. 54,097</u> (Typed or printed name and Reg. No.) </p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*</p> <p><input checked="" type="checkbox"/> * Total of <u>1</u> forms are submitted.</p>			<u>August 4, 2009</u> Date	<u>/Andrew K. Finn/</u> (Signature)		
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